



**Common
Member Coverage Declarations**

Policy Number:	#PRM09-012-057
Membership Type:	<i>Preferred Member</i>

Named Member and Mailing Address:	Managing Agent Name and Address:
<i>Gulf County Board of Commissioners As a member of Public Risk Management of Florida 1000 Cecil G Costin Sr Blvd, Room 301 Port St Joe, FL 32456</i>	<i>World Risk Management, LLC 141 Terra Mango Loop, Suite A Orlando, FL 32835</i>

Coverage Period:	From: 04/01/2010	To: 04/01/2011
	At 12:01 a.m. EST	At 12:01 a.m. EST

Schedule of Coverages

Section I: Property	Included
Section II: Comprehensive General Liability	Included
Section III: Automobile Liability	Included
Section IV: Public Officials Errors & Omissions	Included
Section V: Excess Workers' Compensation & Employers' Liability for a Group Self-Insurer Fund Member	Included
Section VI: Employee Benefits Liability	Included
Section VII: Crime	Included

[REDACTED] [REDACTED]

In return for the payment of the member contribution, and subject to all of the terms in this coverage document, Public Risk Management agrees to provide the coverage(s) as indicated in the schedule above. Specific coverage terms and conditions are afforded in the individual coverage forms by line of coverage.

Claim Reporting: Gallagher Bassett Services, Inc.
(239) 334-3144 (FAX)



Property Member Coverage Declarations

Policy Number:	PRM09-012-057
Membership Type:	Preferred Member

Named Member and Mailing Address:	Managing Agent Name and Address:
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Coverage Period:	From: 04/01/2010	To: 04/01/2011
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<u>Coverage Schedule</u>	
This coverage document provides the coverage's as shown below in the Coverage schedule with the corresponding limits and deductibles.	
<u>Covered Property</u>	
<u>Perils Covered:</u>	
All risks of direct physical loss or damage, including flood, earthquake including equipment breakdown subject to the policy exclusions. Auto Physical Damage included at Actual Cash Value. Terrorism is excluded.	
<u>Valuation:</u>	
Replacement Cost	All Other Perils Loss Limit (Total Insured Values per schedule on file with PRM)
Actual Loss Sustained	Real and Personal Property
	Time Element (Total Insured Values per schedule on file with PRM)
<u>Deductibles</u>	
\$1,000	Per Occurrence – All Other Perils
<u>Shared Wind Deductibles</u>	
5%	Of Total Values at Each Building involved in the loss, per any one occurrence.
<u>Wind Policy Shared Limits</u>	
Any one occurrence as outlined in the Schedule of Limits and Sub-Limits. Sub-Limits do not increase the policy limit of \$75,000,000. Membership schedule on file with the Public Risk Management of Florida.	
All Terms and Conditions per Coverage Document PRM09-012	



Comprehensive General / Law Enforcement Liability Member Coverage Declaration

Policy Number:	<i>PRM09-012-057</i>
Membership Type:	<i>Preferred Member</i>

Named Member and Mailing Address:	Managing Agent Name and Address:
<i>Gulf County Board of Commissioners</i> <i>As a member of Public Risk Management of Florida</i> <i>1000 Cecil G Costin Sr Blvd, Room 301</i> <i>Port St Joe, FL 32456</i>	<i>World Risk Management, LLC</i> <i>141 Terra Mango Loop, Suite A</i> <i>Orlando, FL 32835</i>

Coverage Period:	From: 04/01/2010	To: 04/01/2011
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Limits Of Liability	Deductibles
Commercial General Liability	
\$2,000,000 Each Occurrence	
\$2,000,000 Personal/Advertising Injury	
EXCLUDED Medical Expense	NIL Per Occurrence
Law Enforcement	
\$2,000,000 Each Occurrence	NIL Per Occurrence

Forms & Endorsements
All Terms and Conditions per Coverage Document PRM09-012



Automobile Member Coverage Declarations

Policy Number:	PRM09-012-057
Membership Type:	Preferred Membership

Named Member and Mailing Address:	Managing Agent Name & Mailing Address:
Gulf County Board of Commissioners As a member of Public Risk Management of Florida 1000 Cecil G Costin Sr Blvd, Room 301 Port St Joe, FL 32456	World Risk Management, LLC 141 Terra Mango Loop, Suite A Orlando, FL 32835

Coverage Period:	From: 04/01/2010 At 12:01 a.m. EST	To: 04/01/2011 At 12:01 a.m. EST
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Schedule of Automobile Coverages and Limits			
This coverage document provides the coverages as shown below in the coverage schedule with the corresponding limits and deductibles. Each of the coverages apply only to those autos shown as covered auto symbols. The covered auto symbol reference is available below. Auto Physical Damage is provided under the Property Section I of the Coverage Document.			
Coverages	Covered Autos Symbol	Limit	Deductible
Liability	1,8 9	\$2,000,000	\$0
Personal Injury Protection	5	Statutory	\$0
Medical Payments		Excluded	\$0
Uninsured Motorist		Excluded	\$0
Underinsured Motorist		Excluded	\$0

- (1) Any "Auto"
- (2) Owned "Autos" only
- (3) Owned Private Passenger "Autos"
- (4) Owned "Autos" Other Than Private Passenger
- (5) All Owned "Autos" Which Require No-Fault Coverage

- (6) Owned "Autos" Subject To Compulsory U.M. Law
- (7) "Autos" Specified On Schedule
- (8) Hired "Autos"
- (9) Non-Owned "Autos"

Forms & Endorsements
All Terms and Conditions per Coverage Document PRM09-012



Public Officials Errors & Omissions Member Coverage Declaration

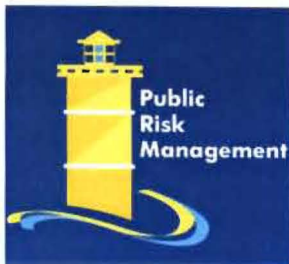
Policy Number:	PRM09-012- 057
Membership Type:	Preferred Member

Named Member and Mailing Address:	Managing Agent Name and Address:
Gulf County Board of Commissioners <i>As a member of Public Risk Management of Florida</i> 1000 Cecil G Costin Sr Blvd, Room 301 Port St Joe, FL 32456	World Risk Management, LLC 141 Terra Mango Loop, Suite A Orlando, FL 32835

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Limits Of Liability	Deductibles
Public Officials Errors & Omissions –Per Claim	Retro Date: 10/01/1990
\$2,000,000 Each Occurrence	
\$5,700,000 Annual Aggregate	
\$1,750 EEOC Administrative Hearings	NIL Per Claim
Association Annual Aggregate EEOC	
\$175,000 Administrative Hearings	
Sexual Harassment -Per Claim	Retro Date: 10/01/1990
\$2,000,000 Each Person	NIL Per Claim
\$5,700,00 Annual Aggregate (Part of E&O Aggregate)	
Sexual Misconduct –Per Claim – NOT COVERED	Retro Date: NOT COVERED
\$2,000,000 Each Person	NIL Per Claim
\$5,700,000 Annual Aggregate (Part of E&O Aggregate)	

Forms & Endorsements
All Terms and Conditions per Coverage Document PRM09-012



Workers' Compensation and Employers' Liability for a Group Self-Insurer Fund Member Declarations

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Named Member & Mailing Address:	Managing Agent Name & Mailing Address:	
Gulf County Board of Commissioners <i>As a member of Public Risk Management of Florida</i> 1000 Cecil G Costin Sr Blvd, Room 301 Port St Joe, FL 32456	World Risk Management, LLC 141 Terra Mango Loop, Suite A Orlando, FL 32835	
Coverage Period:	From: 04/01/2010 At 12:01 a.m. EST	To: 04/01/2011 At 12:01 a.m. EST

Limits Of Liability:	
Part 1 – Workers' Compensation (States): FL Statutory Limits	
Part 2 – Employer's Liability	
<u>\$3,000,000</u>	Each Accident
<u>\$3,000,000</u>	Disease-Policy Limit
<u>\$3,000,000</u>	Disease-Each Employee
Part 3 – Other States Insurance: Included	
Deductible:	N/A

Description	Class Code	Estimated 2010 Payroll
Road Maintenance	5509	\$695,456
Excavation NOC & Drivers	6217	\$167,172
Ambulance	7370	\$563,516
Firefighters	7704	\$135,000
Police/Corrections/Probation	7720	\$483,219
Auto Repair	8380	\$226,579
Outside NOC	8742	\$401,241
Clerical	8810	\$1,839,750
Animal Control	8831	\$27,927
Building Maintenance	9015	\$306,092
Street Cleaning	9402	\$145,032
Municipal Employees	9410	\$180,969
TOTAL		\$5,171,953

Forms & Endorsements:
All Terms and Conditions per Coverage Document PRM09-012. Group Self-Insurer Fund Members are subject to State Fee Assessments and WC Annual Payroll Audit.



Employee Benefits Liability Member Coverage Declaration

Policy Number:	PRM09-012-057
Membership Type:	Preferred Member

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Limits Of Liability	Deductibles
Employee Benefits – Per Claim	Retro Date: 10/01/1990
\$2,000,000 Each Claim	NIL Per Claim
\$5,700,000 Aggregate	NIL Per Claim

Forms & Endorsements
All Terms and Conditions per Coverage Document PRM09-012



Crime Member Coverage Declaration

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Limits Of Liability	Deductibles
Crime	
\$500,000 Monies & Securities	\$1,000 Per Occurrence
\$500,000 Forgery or Alteration	\$1,000 Per Occurrence
\$500,000 Employee Dishonesty	\$1,000 Per Occurrence

Forms & Endorsements
All Terms and Conditions per Coverage Document PRM09-012